Docket No.: 110631

## DECLARATION AND POWER OF ATTORNEY UNDER 35 USC §371(c)(4) FOR PCT APPLICATION FOR UNITED STATES PATENT

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below under my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought, namely the invention entitled: <u>DETECTING SUPERANTIGEN ACTIVITY IN A BIOLOGICAL SAMPLE</u> described and claimed in international application number PCT/FR00/00691 filed March 20, 2000.

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) filed by me or my legal representatives or assigns within one year prior to my international application are hereby claimed:

French Patent Application No. 99 03622 filed March 19, 1999 French Patent Application No. 99 13755 filed October 28, 1999

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to my international application, or (b) before the filing date of the above-named foreign priority application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

/]

James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411; Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771; Mario A. Costantino, Reg. No. 33,565; Stephen J. Roe, Reg. No. 34,463; Joel S. Armstrong, Reg. No. 36,430; Christopher W. Brown, Reg. No. 38,025; and Richard E. Rice, Reg. No. 31,560.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

l	Typewritten Fu of Sole or First		1-a	Herve		PERRON
2	Inventor's Sign	ıature:		iven Name tenve	Middle Initial	Family Name
3	Date of Signature:		oct.	022 Fh	2001	
	Residence:		Lyon	Month	FRY	Year France
	Citizenship:	France	City	···	State or Province	Country
	Post Office Address: (Insert complete mailing address, including country)		15 Rue de Boyer			
				69005 LYON	(France)	

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

1	Typewritten Full Name of Joint Inventor	Monique_	Mon	<u>LAFON'</u>				
2	Inventor's Signature:	Given Name	. Middle Initial	Family Name				
3	Date of Signature:	10	, 23	2001				
-	Residence:	PARIS Month	Day Day	Year France				
	Citizenship: Fran	City	State or Province	Country				
. 1	Post Office A (Insert comp address, incl Typewritten Full Name							
	of Joint Inventor	Given Name	Middle Initial	Family Name				
2	Inventor's Signature:	——————————————————————————————————————		Family Name				
3	Date of Signature:	Month	Day	Year				
<u> </u>	Residence:							
y D	Citizenship:	City	State or Province	Country				
	Post Office Address:  (Insert complete mailing address, including country)  Typewritten Full Name							
Ti .	of Joint Inventor	Given Name	Middle Initial	Family Name				
± 2 ≟ a	Inventor's Signature:							
± 3	Date of Signature:	Month	Day	Year				
	Residence:	City	State or Province	Country				
	Citizenship:  Post Office A  (Insert compl address, incli							
1	Typewritten Full Name of Joint Inventor							
2	Inventor's Signature:	Given Name	Middle Initial	Family Name				
3	Date of Signature:							
	Residence:	Month	Day	Year				
	Citizenship:	City	State or Province	Country				
	Post Office A (Insert compl address, inclu							

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.